UNITED STATES COURT OF APPEALS FOR THE FEDERAL CIRCUIT

Confidential Mediator Report

Short Caption:				
Case Number:				
Mediator's Name and	Contact Information	on:		
				-
				_
				-
Was a settlement agree		Yes		-
		Full	Partial	
Date of First Contact v	ith the Parties: _			
Date Settlement Agree	ment Signed/Med	liation Terminated	1:	
Total Mediator Time:				
Who Participated:	_Lawyers Only	Lawyer	s & Clients	Nonparties
How did you conduct t	he mediation:	_Number of Fac	e-to-Face Meeting	S
	_	Number of Tele	ephone Conferenc	es
		Number of Wri	tten Submissions	
		Number of Oth	er Contacts/Confe	rences
If the case was settled, could not have been of	-	•		an apology) that

On a separate sheet of paper, please evaluate the mediation. For example, were the techniques you used effective? Did the mediation present any unusual problems? If the case settled, what did you do to achieve that result? In hindsight, would you do anything differently? How can the mediation program be improved?

Did you have expertise in the legal issues involved in the case?YesNo
What impact, if any, did this have on the mediation?
Was the Circuit Mediation Office responsive/supportive?YesNo
Will you recommend others join the program as volunteer mediators?YesNo
Will you participate in the mediation program again?YesNo
Comments/ Suggestions please:

Thank you for your participation in the pilot program. Please return this completed form to:

Eleanor M. Thayer, Esq.
Senior Staff Attorney
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Washington, DC 20439